NQS Priority #1: Making Care Safer by Reducing the Harm Caused in the Delivery of Care

National Measure: Hospital-acquired Conditions (HAC)	National Baseline ¹	National Target
Incidence of measurable hospital-acquired conditions	145 HACs per 1,000 admissions	Reduce preventable HACs by 40% by the end of 2013
California Measure: Hospital-acquired Conditions ²	California Baseline	California Target
NOTE: In each California baseline cell, the first line indicates the observed rate per 100,000 popul second line indicates the total number of cases statewide.	llation, and the number	in parentheses () on the
Accidental Puncture or Laceration	29.6 (8,230)	17.8
Postoperative Hemorrhage or Hematoma	12.8 (3,565)	7.7
Central Venous Catheter-related Bloodstream Infections	11.6 (3,211)	7.0
latrogenic Pneumothorax	5.6 (1,566)	3.4
Postoperative Wound Dehiscence	1.4 (395)	0.8

¹ Source: Agency for Healthcare Research and Quality, Centers for Disease Control and Prevention, and Centers for Medicare and Medicaid Services, March 2012.

² Source: OSHPD Patient Discharge Data, 2009; Agency for Healthcare Research and Quality, Patient Safety Indicators, Version 4.2., County Level Data available

NQS Priority #1: Making Care Safer by Reducing the Harm Caused in the Delivery of Care

National Measure: Hospital Readmissions	National Baseline ¹	National Target
All-payer 30-day readmission rate*	14.4%	12% by the end of 2013
* Executive Order/National Quality Strategy shared priority		01 2013

California Measures: Hospital Readmissions 2010 California Hospital 30-day Readmission Rates for <u>Top 5 Con</u>	Oalifa mila		
Description	No. Patients w/ 30-day Readmission	Readmission Rate %	California Target
Septicemia or Severe Sepsis	15,649	23.0	18% by the end of 2015
Pneumonia	9,401	16.1	13% by the end of 2015
Heart Failure	9,352	24.6	20% by the end of 2015
Esophagitis & Gastroenteritis	6,235	13.6	11% by the end of 2015
COPD & Asthma	5,365	13.3	11% by the end of 2015



¹ Source: Agency for Healthcare Research and Quality, Centers for Disease Control and Prevention, and Centers for Medicare and Medicaid Services, March 2012.

²OSHPD Patient Discharge Data, 2010, County Level Data Available Let's Get Healthy California Task Force

NQS Priority #2: Ensuring That Each Person and Family is Engaged in Their Care

National Measure: Timely Care		National Baseline ¹	National Target
Adults who needed care right away for an illness, injury, or condition in the last 12 months who sometimes or never got care as soon as wanted		14.1%	None Set
California Measures: Timely Care	Survey	California Baseline	California Target

² California Health Interview Survey: Large county data level available; Small county level data may be available



¹ Source: Agency for Healthcare Research and Quality, Center for Financing, Access, and Cost Trends, Medical Expenditure Panel Survey, 2009.

NQS Priority #2: Ensuring That Each Person and Family is Engaged in Their Care

National Measure: Decision-Making	National Baseline ¹	National Target
People with a usual source of care whose health care providers sometimes or never discuss decisions with them	15.4%	None Set

California Measure: Decision-Making	Survey	California Baseline	California Target
How often does your doctor or medical provider explain clearly what you need to do to take care of your health? Would you say		Data Forthcoming	None Set



¹ Source: Agency for Healthcare Research and Quality, Center for Financing, Access, and Cost Trends, Medical Expenditure Panel Survey, 2009.

² California Health Interview Survey: Large county level data available; Small county level data may be available

NQS Priority #3: Promoting Effective Communication and Coordination of Care

National Measure: Patient-Centered Medical Home	National Baseline ¹	National Target
Percentage of children needing care coordination who receive effective care coordination.	69%	None Set

California Measures: Patient-Centered Medical Home	Survey	California Baseline	California Target
coordinate your care with other doctors or services, such as tests or treatments?	CHIS ² Adolescent Survey	67.2% - Yes	94%
Is there anyone at (CHILD's) doctor's office or clinic who helps coordinate (his/her) care with other doctors or services such as tests or treatments?	CHIS ² Child Survey	63.9% - Yes	90%

¹ Source: Health Resources and Services Administration, Maternal and Child Health Bureau; Centers for Disease Control and Prevention, National Center for Health Statistics, National Survey of Children's Health, 2007.

²California Health Interview Survey: Large county level data available; Small county level data may be available



NQS Priority #4: Promoting the Most Effective Prevention and Treatment Practices for the Leading Causes of Mortality, Starting with Cardiovascular Disease

National Measure: Blood Pressure Control	National Baseline	National Target
People with hypertension who have adequately controlled blood pressure* * Executive Order/National Quality Strategy shared priority	46%¹	65% by 2017

California Measure: Blood Pressure Control	Survey	California Baseline	California Target
Controlling High Blood Pressure - Adults (18-85yrs) diagnosed with hypertension* * Executive Order/National Quality Strategy shared priority	HEDIS ²	Medicare - 79% PPOs - 50% HMOs - 78%	Medicare - 87% PPOs - 70% HMOs - 86%

¹ Source: Centers for Disease Control and Prevention, National Health and Nutrition Examination Survey (NHANES), 2005-2008

² Statewide and Health Plan Specific Data



NQS Priority #4: Promoting the Most Effective Prevention and Treatment Practices for the Leading Causes of Mortality, Starting with Cardiovascular Disease

National Measure: Cholesterol Management	National Baseline	National Target
People with high cholesterol who have adequately managed hyperlipidemia	33% ¹	65% by 2017

California Measure: Cholesterol Management	Survey	California Baseline	California Target
Cholesterol Management – Cardiovascular Conditions LDL-C <100 mg/dL	HEDIS ²	Medicare - 76% PPOs - 50% HMOs - 70%	Medicare - 91% PPOs - 70% HMOs - 84%

¹ Source: Centers for Disease Control and Prevention, National Health and Nutrition Examination Survey (NHANES), 2005-2008

² Statewide and Health Plan Specific Data



NQS Priority #4: Promoting the Most Effective Prevention and Treatment Practices for the Leading Causes of Mortality, Starting with Cardiovascular Disease

National Measure: Aspirin Use	National Baseline	National Target
People at increased risk of cardiovascular disease who are taking aspirin	47%³	65% by 2017

California Measure: Aspirin Use	Survey	California Baseline	California Target
What percentage of women, ages 55-79, and men, ages 45-79, who have cardiovascular risks, had their doctor or another provider talk with them about the pros and cons of taking aspirin as part of their heart care?	HEDIS ²	Data Forthcoming	N/A

² Statewide and Health Plan Specific Data Available

³ Source: Centers for Disease Control and Prevention, National Ambulatory Medical Care Survey (NAMCS) and National Hospital Ambulatory Medical Care Survey (NHAMCS), 2007-2008



NQS Priority #5: Working with Communities to Promote Wide Use of Best Practices to Enable Healthy Living

National Measure: Depression	National Baseline ¹	National Target
Percentage of adults reported symptoms of a major depressive		
episode (MDE) in the last 12 months who received treatment	68.3%	None Set
for depression in the last 12 months		

California Measure: Depression	Survey	California Baseline	California Target
What percentage of those who were treated for depression remained on anti-depressant medication for 6 months of ongoing care following their initial treatment?	HEDIS ²	47.32% ³	66.3%

³ CA HMO/PPO Combined Average



¹ Source: Substance Abuse and Mental Health Services Administration, Office of Applied Studies, National Survey on Drug Use and Health, 2010

² Statewide and Health Plan Specific Data Available

Additional Measures: Reducing Potentially Avoidable Hospitalizations

Reducing Potentially Avoidable Hospitalizations - Adults	Source	California Baseline	California Target	
NOTE: In each California baseline cell, the first line indicates the age-sex adjusted rate per 100,000 state population, and the number in parentheses () on the second line indicates the total number of cases.				
Congestive Heart Failure	AHRQ Prevention Quality Indicators ²	272.4 (73,213)	217.9	
Bacterial Pneumonia		235.8 (64,185)	188.6	
Diabetes Indicators ¹		194.8 (54,633)	155.8	
Adult Asthma		87.3 (24,386)	69.8	

² Source: OSHPD Patient Discharge Data, 2009; Agency for Healthcare Research and Quality, Prevention Quality Indicators, Version 4.2., County Level Data Available



¹ This represents the combined values of the following indicators: Diabetes Short Term Complications, Diabetes Long Term Complications, Uncontrolled Diabetes, and Lower-extremity Amputation Among Patients with Diabetes.

Additional Measures: Reducing Potentially Avoidable Hospitalizations

Reducing Potentially Avoidable Hospitalizations - Children	Source	California Baseline	California Target
NOTE: In each California baseline cell, Rate = Per 100,000 state or county population with the exceptions of Pediatric Perforated Appendix (per 1,000 appendicitis cases) and Low Birth Weight (per 1,000 live births). The number in parentheses () on the second line indicates the total number of cases. All rates are age-sex adjusted (with the exception of Low Birth Weight).			
Pediatric Asthma (per 100,000 population)		99.2 (8,689)	79.4
Pediatric Gastroenteritis (per 100,000 population)		72.3 (7,201)	57.8
Pediatric Urinary Tract Infection (per 100,000 population)	AHRQ	35.1 (3,405)	28.1
Pediatric Diabetes Short-term Complications (per 100,000 population)	Pediatric Quality Indicators ²	20.2 (1,378)	16.2
Pediatric Perforated Appendix (per 1,000 appendicitis cases)		294.0 (4,162)	235.2
Low Birth Weight (per 1,000 live births)		56.1 (29,062)	44.9

² Source: OSHPD Patient Discharge Data, 2009; Agency for Healthcare Research and Quality, Pediatric Quality Indicators, Version 4.2 County Level Data Available

